

MHN

08 CV 2291

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<p>■ Complete Items 1, 2, and 3. Also complete Item 4 if Restricted Delivery is desired.</p> <p>■ Print your name and address on the reverse so that we can return the card to you.</p> <p>■ Attach this card to the back of the mailpiece, or on the front if space permits.</p>		<p>A. Signature X <i>[Signature]</i> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p>	
<p>1. Article Addressed to:</p> <p>Norbert G. Jaworski United States District Court Southern District of Illinois, East St. Louis P.O. Box 249 East St. Louis, IL 62202</p>		<p>B. Received by (Printed Name) <i>DEMA ALEXANDER</i></p> <p>C. Date of Delivery <i>6-2-08</i></p>	
		<p>D. Is delivery address different from Item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p>	
		<p>Service Type <input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input checked="" type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D. </p>	
		<p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>	
<p>2. Article Number (Transfer from service label)</p>		<p>7006 0100 0001 7313 4115</p>	

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

FILED
 6-5-2008
 JUN 05 2008 PH

MICHAEL W. DOBBINS
 CLERK, U.S. DISTRICT COURT